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| Fill in this information to identify your case: | | |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| WESTERN DISTRICT OF TENNESSEE | _ | |
| Case number (if known) | Chapter you are filing under: | |
| | ☐ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | |
|-----|---|--|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is o | n Dallas | Kimberly |
| | your government-issued picture identification (for example, your driver's | | First name |
| | license or passport). | Middle name | Middle name |
| | Bring your picture | VanBuren | VanBuren |
| | identification to your meeting with the trustee | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you had used in the last 8 years include your married or maiden names. | | Kimberly Williams Kimberly A VanBuren Kimberly Ann VanBuren Kimberly A Williams |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | f xxx-xx-0981 | xxx-xx-4647 |

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Debtor 1 Dallas VanBuren
Kimberly VanBuren

Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | |
|----|--|---|--|--|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) EINs | ■ I have not used any business name or EINs. Business name(s) EINs | | |
| 5. | Where you live | 1055 Maness Rd. | If Debtor 2 lives at a different address: | | |
| | | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | |
| | | Chester | _ | | |
| | | County | County | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | |
| 6. | Why you are choosing this district to file for | Check one: | Check one: | | |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | |
| | | | | | |

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| Deb | otor 2 | Kimberly VanBure | n | | | _ | Case number (if known) | | |
|-----|------------------------|---|---|---|---|---|---|--|--|
| | | | | | | | | | |
| Par | t 2: | Tell the Court About | our Bank | ruptcy Ca | ase | | | | |
| 7. | Bank | chapter of the cruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | | |
| | cnoc | sing to file under | ☐ Chapt | er 7 | | | | | |
| | | | ☐ Chapt | er 11 | | | | | |
| | | | ☐ Chapt | er 12 | | | | | |
| | | | ■ Chapt | er 13 | | | | | |
| 8. | How | you will pay the fee | abo ord a p | out how your er. If your re-printed | ou may pay. Typically, if you are attorney is submitting your pay address. | e paying the fee ment on your b | heck with the clerk's office in your local court for more details e yourself, you may pay with cash, cashier's check, or money behalf, your attorney may pay with a credit card or check with | | |
| | | | | | y the fee in installments. If you see <i>in Installment</i> s (Official Form | | option, sign and attach the Application for Individuals to Pay | | |
| | | | ☐ I re but that | quest that is not red t applies t | at my fee be waived (You may juired to, waive your fee, and more your family size and you are u | request this op ay do so only if unable to pay th | otion only if you are filing for Chapter 7. By law, a judge may, f your income is less than 150% of the official poverty line he fee in installments). If you choose this option, you must fill ed (Official Form 103B) and file it with your petition. | | |
| 9. | Have | you filed for | ■ No. | | | | | | |
| | | ruptcy within the | _ | | | | | | |
| | iast | 3 years? | ☐ Yes. | District | | When | Case number | | |
| | | | | District | | When | Casa asserban | | |
| | | | | District | | When | Case number Case number | | |
| | | | | | | | | | |
| 10. | | nny bankruptcy s pending or being | ■ No | | | | | | |
| | filed not f you, | by a spouse who is iling this case with or by a business ner, or by an | ☐ Yes. | | | | | | |
| | | | | Debtor | | | Relationship to you | | |
| | | | | District | | When | Case number, if known | | |
| | | | | Debtor | | | Relationship to you | | |
| | | | | District | | When | Case number, if known | | |
| 11. | | ou rent your | □ No. | Go to | line 12. | | | | |
| | resic | lence? | ■ Yes. | Has yo | our landlord obtained an eviction | ı judgment aga | ainst you and do you want to stay in your residence? | | |
| | | | | | No. Go to line 12. | | | | |
| | | | | | Yes. Fill out <i>Initial Statement A</i> bankruptcy petition. | About an Eviction | ion Judgment Against You (Form 101A) and file it with this | | |

Debtor 1

Dallas VanBuren

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| Deb | otor 2 Kimberly VanBure | en | | Case number (if known) |
|-----|---|--------------------|--|---|
| | | | | |
| Par | t 3: Report About Any Bu | sinesses | You Own as a Sole Prop | rietor |
| | Are you a sole proprietor | | · | |
| 12. | of any full- or part-time business? | ■ No. | Go to Part 4. | |
| | | ☐ Yes. | Name and location of | business |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name of business, if a | iny |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Number, Street, City, | State & ZIP Code |
| | it to this petition. | | Check the appropriate | box to describe your business: |
| | · | | | usiness (as defined in 11 U.S.C. § 101(27A)) |
| | | | ☐ Single Asset R | eal Estate (as defined in 11 U.S.C. § 101(51B)) |
| | | | ☐ Stockbroker (a | s defined in 11 U.S.C. § 101(53A)) |
| | | | | oker (as defined in 11 U.S.C. § 101(6)) |
| | | | ☐ None of the ab | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small | deadline operation | s. If you indicate that you a | the court must know whether you are a small business debtor so that it can set appropriate are a small business debtor, you must attach your most recent balance sheet, statement of and federal income tax return or if any of these documents do not exist, follow the procedure hapter 11. |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am filing under Chap Code. | ter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy |
| | | ☐ Yes. | I am filing under Chap | ter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. |
| Par | t 4: Report if You Own or | Have Any | / Hazardous Property or | Any Property That Needs Immediate Attention |
| 14. | Do you own or have any | ■ No. | | |
| | property that poses or is alleged to pose a threat | _ | | |
| | of imminent and | ☐ Yes. | What is the hazard? | |
| | identifiable hazard to public health or safety? | | | |
| | Or do you own any property that needs immediate attention? | | If immediate attention is needed, why is it needed | ? |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is the property? | Number, Street, City, State & Zip Code |
| | | | | · · · · · · · · · · · · · · · · · · · |

Debtor 1

Dallas VanBuren

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Debtor 1 Dallas VanBuren

Debtor 2 Kimberly VanBuren

Case number (if known)

Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions

about finances.

☐ **Disability.** My physical disability causes

me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

■ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes m

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty

in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| | otor 1 otor 2 | Dallas VanBuren Kimberly VanBure | en | Boodment | Case | number (if known) | |
|---------------------------------------|---------------------------|--|---|---|---|--|---|
| Par | t 6: | Answer These Questi | ons for Rep | orting Purposes | | | |
| | Wha | t kind of debts do nave? | 16a. / | Are your debts primarily consumndividual primarily for a personal, to No. Go to line 16b. | | | § 101(8) as "incurred by an |
| | | | I | Yes. Go to line 17. | | | |
| | | | | Are your debts primarily busines noney for a business or investmer | | | |
| | | | [| ☐ No. Go to line 16c. | | | |
| | | | | ☐ Yes. Go to line 17. | | | |
| | | | 16c. S | State the type of debts you owe that | at are not consumer debts or b | business debts | |
| 17. | | ou filing under ter 7? | ■ No. | am not filing under Chapter 7. Go | to line 18. | | |
| Do you estimate that after any exempt | | | | am filing under Chapter 7. Do you expenses are paid that funds will b | | | and administrative |
| | adm | nistrative expenses | [| □ No | | | |
| | be a | paid that funds will vailable for ribution to unsecured litors? | [| □Yes | | | |
| 18. | 18. How many Creditors do | | 1 -49 | | 1,000-5,000 | <u> </u> | |
| | owe' | estimate that you ? | ☐ 50-99 ☐ 100-199 ☐ 200-999 | | ☐ 5001-10,000 ☐ 10,001-25,000 | ☐ 50,001-1 ☐ More tha | |
| 19. | estin | much do you nate your assets to orth? | \$100,00 | 0,000 - \$100,000 01 - \$500,000 01 - \$1 million | □ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million | n | 0,001 - \$1 billion 100,001 - \$10 billion 1000,001 - \$50 billion 10 \$50 billion |
| 20. | | much do you nate your liabilities ? | ' ' | 0,001 - \$100,000 | | 000,001 - \$10 billion 1,000,001 - \$50 billion | |
| Par | t 7· | Sign Below | | | | | |
| | you | 0.9 20.0 | I have exar | mined this petition, and I declare u | inder penalty of perjury that the | e information provided is | true and correct. |
| | | | | osen to file under Chapter 7, I am es Code. I understand the relief a | | | |
| | | | f no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | | |
| | | | I request re | elief in accordance with the chapte | er of title 11, United States Coo | de, specified in this petition | on. |
| | | | | d making a false statement, conce case can result in fines up to \$25 3571. | | | |
| | | | /s/ Dallas Dallas Va | VanBuren | /s/ Kimber Kimberly \ | rly VanBuren VanBuren | |
| | | | Signature of | | Signature of | | |
| | | | Executed of | December 29, 2015 MM / DD / YYYY | Executed on | December 29, 201 MM / DD / YYYY | 5 |

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| | | Document | | |
|----------------------|--|---|----------------------------------|--|
| Debtor 1 Debtor 2 | Dallas VanBuren Kimberly VanBure | en | Cas | se number (if known) |
| | | | | |
| | attorney, if you are ted by one | under Chapter 7, 11, 12, or 13 of title 11, U | Inited States Code, and have | e informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § |
| | not represented by ey, you do not need s page. | | (Ď) applies, certify that I have | no knowledge after an inquiry that the information |
| | | /s/ Alissa York Gay Signature of Attorney for Debtor | Date | December 29, 2015 MM / DD / YYYY |
| | | Alissa York Gay Printed name | | |
| | | Teel & Maroney, PLC Firm name | | |
| | | 425 East Baltimore Jackson, TN 38301 | | |
| | | Number, Street, City, State & ZIP Code Contact phone (731)424-3315 | Email address | |

024812 Bar number & State

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| Fill in this information to identify your case: | | | | | |
|---|------------------|--------------------|--------------|---|------------------------------------|
| Debtor 1 | Dallas VanBuren | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | Kimberly VanBure | en | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Bankruptcy Court for the: | | WESTERN DISTRICT (| OF TENNESSEE | | |
| Case number | | | | _ | Check if this is an amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | 11: Summarize Your Assets | | |
|-----|--|------------|---------------------------|
| | | | assets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 85,000.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 21,781.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 106,781.00 |
| Par | 2: Summarize Your Liabilities | | |
| | | | iabilities nt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 119,500.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 34,956.15 |
| | Your total liabilities | \$ | 154,456.15 |
| Par | 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 4,519.99 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 4,251.00 |
| Par | 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other s | chedules. |
| 7. | Yes What kind of debt do you have? | | |
| | | | |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Case number (if known)

Document Page 9 of 57 Debtor 1 **Dallas VanBuren** Debtor 2 Kimberly VanBuren

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | \$_ | 4,576.41 |
|----|--|-----|----------|
| | | - | |

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Bort 4 on Cohodula F/F convetho following: | Total claim | |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

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|--|---|--|---|---|--|---|
| Fill in this | information to identify you | case and this filing: | | | | |
| Debtor 1 | Dallas VanBurer | = | | | | |
| Debtor 2 | First Name Kimberly VanBu | Middle Name | Last Name | | | |
| (Spouse, if filin | | Middle Name | Last Name | | | |
| United Stat | es Bankruptcy Court for the: | WESTERN DISTRIC | T OF TENNESSEE | | | |
| Case numb | per | | | | | Check if this is an amended filing |
| _ | <u>Form 106A/B</u> dule A/B: Prop | ertv | | | | 12/15 |
| In each categ it fits best. B more space i | ory, separately list and describ e as complete and accurate as s needed, attach a separate she scribe Each Residence, Building | e items. List an asset onl possible. If two married pet to this form. On the to | people are filing together op of any additional pages | , both are equally responsib s, write your name and case | le for supplying cor | tegory where you thinl rect information. If |
| In each categit fits best. B more space i | ory, separately list and describ e as complete and accurate as s needed, attach a separate she | e items. List an asset onl possible. If two married pet to this form. On the to g, Land, or Other Real Es | people are filing together op of any additional pages tate You Own or Have an | both are equally responsib s, write your name and case Interest In | le for supplying cor | tegory where you thinl rect information. If |
| In each categit fits best. B more space i Part 1: Des 1. Do you ow No. Go | ory, separately list and describ e as complete and accurate as s needed, attach a separate she cribe Each Residence, Building | e items. List an asset onl possible. If two married pet to this form. On the to g, Land, or Other Real Es | people are filing together op of any additional pages tate You Own or Have an | both are equally responsib s, write your name and case Interest In | le for supplying cor | tegory where you thinl rect information. If |
| In each categit fits best. B more space i Part 1: Des 1. Do you ow No. Go Yes. W | ory, separately list and describe e as complete and accurate as s needed, attach a separate she cribe Each Residence, Building on or have any legal or equitable to Part 2. | e items. List an asset only possible. If two married peet to this form. On the tog, Land, or Other Real Este interest in any residence. What is | people are filing together op of any additional pages tate You Own or Have an | both are equally responsible, write your name and case Interest In ar property? | le for supplying cor number (if known). | tegory where you think rect information. If Answer every question the same revery question or exemptions. Put the |

Current value of the Current value of the IL 60636-0000 Chicago Land portion you own? entire property? \$85,000.00 \$85,000.00 City State ZIP Code ■ Investment property ☐ Timeshare Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or à life estate), if known. Who has an interest in the property? Check one tenants in common ☐ Debtor 1 only Cook ☐ Debtor 2 only County ☐ Debtor 1 and Debtor 2 only Check if this is community property (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number:

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....

\$85,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

| Debto | or 1 | Case 15-1 | | Doc 1 | Filed 12/29/15 Document | Entered 1 Page 11 of | 2/29/15 10:3 57 | 36:39 De | sc Main |
|----------------|--------------|------------------------------------|---|--|--|--|---|------------------------------|---|
| Debto | | Kimberly Var | | | | | Case number | (if known) | |
| 3. Ca ı | | ns, trucks, tract | ors, spor | t utility veh | icles, motorcycles | | | | |
| | Yes | | | | | | | | |
| 3.1 | Make Mode | | | | Who has an interest in the ☐ Debtor 1 only | property? Check one | e the am | ount of any secure | aims or exemptions. Put ed claims on Schedule D: |
| | Year: | | | | Debtor 2 only | | | | |
| | Appro | oximate mileage: | 1 | 64000 | ■ Debtor 1 and Debtor 2 of | only | | it value of the property? | Current value of the portion you own? |
| | Other | r information: | | | ☐ At least one of the debto | = | | | |
| | | | | | Check if this is commu | unity property | | \$6,550.00 | \$6,550.00 |
| .pa Part 3 | ges y | ou have attache | d for Par | t 2. Write th | for all of your entries for all of your entries for at number here | | | => | \$6,550.00 Current value of the portion you own? |
| 0 11- | | ald acade and fr | | | | | | | Do not deduct secured claims or exemptions. |
| Ex | ample No | old goods and fues: Major appliant | Furnitu Locatio Housel home. \$300.00 Accum curtain and par family a mainter | ure, linens, on the work on the work of th | and miscellaneous lestimates that the vatto replace these ite usehold goods and fiverings including lines and eating utensils, s, soft goods, home oplies, yard and gardelittle of no resale values. | household good lue of these ite ms would be hi urnishings, per ens, kitchen ute mementoes, pi cleaning suppli en supplies and | ems to be igher. sonal ensils, pots ictures of ies, home dany similar | | \$300.00 |
| | ample No | es: Televisions ar | | | o, stereo, and digital equi edia players, games | pment; computers | , printers, scanne | rs; music collec | tions; electronic devices |

Official Form 106A/B Schedule A/B: Property page 2

| | Coco 1F 1 | 2020 | Dog 1 | Filed 12/20/15 | Entored 12/20/15 10:2 | .c.20 | Dogo Main |
|----------------------|---|---|--|--|--|------------|----------------------------------|
| | Case 15-1 | | DOC 1 | Document | Entered 12/29/15 10:3 Page 12 of 57 | 0.39 | Desc Main |
| Debtor 1 Debtor 2 | Dallas VanBu Kimberly Var | | | | Case number | (if known) | |
| | | Electro Locatio | | ness Rd., Hendersc | on TN 38340 | | |
| | | home. I | Debtor(s) e | stimates that the va | household goods in debtor(s) lue of these items to be ms would be higher. | | |
| | | curtains and par family a mainter propert | s, bed cove ns, dishes a and friends nance supp | erings including line and eating utensils, , soft goods, home blies, yard and garde | urnishings, personal ens, kitchen utensils, pots mementoes, pictures of cleaning supplies, home en supplies and any similar ue but having a significant | | \$500.00 |
| Example No | bles of value es: Antiques and other collectio | | | | oks, pictures, or other art objects; st | amp, coir | n, or baseball card collections; |
| Example | ent for sports an es: Sports, photog musical instru | graphic, ex | | other hobby equipment; | bicycles, pool tables, golf clubs, skis | s; canoes | and kayaks; carpentry tools; |
| — 165. | Describe | Equipm | ent | | | | \$150.00 |
| ■ No □ Yes. | oles: Pistols, rifles Describe | . 0 | | n, and related equipmer s, designer wear, shoes | | | |
| | Describe | Clothin | g | | | | \$1,000.00 |
| □ No ´ | | elry, cost | | engagement rings, wed | lding rings, heirloom jewelry, watche | s, gems, | gold, silver |
| | rm animals oles: Dogs, cats, b | oirds, hors | es | | | | |
| ■ Yes. | Describe | dog | | | | | \$200.00 |

dog

14. Any other personal and household items you did not already list, including any health aids you did not list

■ No

☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$2,650.00

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| | btor 1 btor 2 | Dallas VanBe Kimberly Var | | | | Case number (if known |) |
|-----|--------------------------|--|--------------|-----------------------|---|--|---|
| | | | | | | | |
| Par | t 4: De | scribe Your Financ | ial Assets | | | | |
| Do | you ov | vn or have any le | egal or eq | uitable interest ii | n any of the following? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ١ | □ No Î | | | • | | ox, and on hand when you file your pet | ition |
| | Yes | | | | | Cash | \$60.00 |
| | Examp | | | | counts; certificates of dep s with the same institution | posit; shares in credit unions, brokeragon, list each. | e houses, and other similar |
| | □ No ■ Yes | | | | Institution name: | | |
| | | | 17.1. | Checking | Regions | | \$1.00 |
| ı | <i>Exam</i> µ ■ No | s, mutual funds, onles: Bond funds, | investme | | rokerage firms, money m | narket accounts | |
| | Non-pu and jo ■ No | ublicly traded sto int venture | ock and i | nterests in incorp | oorated and unincorpor | rated businesses, including an intere | est in an LLC, partnership, |
| I | □ Yes. | Give specific info | | bout theme of entity: | | % of ownership: | |
| | Negoti | iable instruments | include pe | rsonal checks, ca | otiable and non-negotia shiers' checks, promisso ansfer to someone by sig | ory notes, and money orders. | |
| | | Give specific info | | oout them er name: | | | |
| | | ment or pension ples: Interests in I | | | 403(b), thrift savings acc | counts, or other pension or profit-sharin | g plans |
| ı | Yes. | List each accoun | | account: | Institution name: | | \$2,500.00 |
| 22. | Your s | | d deposits | you have made s | | service or use from a company gas, water), telecommunications comp | anies, or others |
| _ | ■ No □ Yes. | | | | Institution name | or individual: | |
| | | ies (A contract fo | r a period | c payment of mor | ney to you, either for life o | or for a number of years) | |
| | ■ No □ Yes | lss | uer name | and description. | | | |
| _ | 26 U.S. | ts in an education C. §§ 530(b)(1), 5 | | | qualified ABLE program | n, or under a qualified state tuition p | rogram. |
| | ■ No □ Yes | Ins | stitution na | me and description | on. Separately file the rec | cords of any interests.11 U.S.C. § 521(| c) : |

| - · · · · - - · · · - - | Document F | Page 14 of 57 | | |
|--|--------------------------------|---|--------------------------|---|
| Debtor 1 Dallas VanBuren Debtor 2 Kimberly VanBuren | | C | ase number (if known) | |
| 25. Trusts, equitable or future interests in pro | pperty (other than anything | listed in line 1), and | rights or powers ex | ercisable for your benefit |
| ■ No□ Yes. Give specific information about them | | | | |
| | | _ | | |
| 26. Patents, copyrights, trademarks, trade sec Examples: Internet domain names, websites No | | | ts | |
| ☐ Yes. Give specific information about them | | | | |
| Licenses, franchises, and other general in Examples: Building permits, exclusive licens No | | holdings, liquor licens | es, professional licen | ses |
| ☐ Yes. Give specific information about them | | | | |
| Money or property owed to you? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. Tax refunds owed to you | | | | |
| □ No | | | | |
| ■ Yes. Give specific information about them, | including whether you alread | dy filed the returns an | d the tax years | |
| | | | | |
| 20 | 115 Estimated Tax Refur | ıd | Federal | \$10,000.00 |
| Examples: Unpaid wages, disability insurance benefits; unpaid loans you made ■ No □ Yes. Give specific information 31. Interests in insurance policies | e; health savings account (H | | er's, or renter's insura | |
| Term Life Ins | surance through Work | Brother | | value. \$10.00 |
| D1 Term Life | Insurance through Wo | ·k D1 | | \$10.00 |
| 32. Any interest in property that is due you from If you are the beneficiary of a living trust, expression on the property in the property of a living trust, expression on the property of a living trust, expression on the property of a living trust, expression on the property of a living trust, expression of a living trust, | pect proceeds from a life inst | urance policy, or are of or made a demand f | ŕ | ceive property because |
| 64. Other contingent and unliquidated claims ■ No □ Yes. Describe each claim | of every nature, including | counterclaims of th | e debtor and rights | to set off claims |

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Case 15-13030 Doc 1 Filed 12/29/15 Entered 12/29/15 10:36:39 Desc Main Document Page 15 of 57 Debtor 1 **Dallas VanBuren** Debtor 2 Kimberly VanBuren Case number (if known) 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$12,581.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6 ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$85,000.00 Part 2: Total vehicles, line 5 \$6,550.00 57. Part 3: Total personal and household items, line 15 \$2,650.00 Part 4: Total financial assets, line 36 \$12,581.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 62. Total personal property. Add lines 56 through 61... \$21,781.00 Copy personal property total \$21,781.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$106,781,00

Official Form 106A/B Schedule A/B: Property page 6

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| | | DUCUITIE | III Paue 10 01 57 | |
|---------------------|--------------------------|--------------------|-------------------|--------------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Dallas VanBuren | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Kimberly VanBur | en | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | WESTERN DISTRICT (| OF TENNESSEE | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: | Identify the Property You Claim as Exempt |
|---------|---|
| | |

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption |
|--|---|-----|---|------------------------------------|
| | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| 2004 Cadillac Escalade 164000 miles Line from <i>Schedule A/B</i> : 3.1 | \$6,550.00 | | \$100.00 | Tenn. Code Ann. § 26-2-103 |
| Line from Scriedule AVB: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Furniture & Appliances Location: 1055 Maness Rd | \$300.00 | | \$300.00 | Tenn. Code Ann. § 26-2-103 |
| Henderson TN 38340 | | | 100% of fair market value, up to any applicable statutory limit | |
| Household items and miscellaneous household goods in debtor(s) home. Debtor(s) estimates that the value of these items to be \$300.00. The cost to replace these items would be higher. Line from Schedule A/B: 6.1 | | | | |
| | | | | |

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Dallas VanBuren Debtor 1 Debtor 2 Kimberly VanBuren Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Electronics** Tenn. Code Ann. § 26-2-103 \$500.00 \$500.00 Location: 1055 Maness Rd., Henderson TN 38340 100% of fair market value, up to any applicable statutory limit Household items and miscellaneous household goods in debtor(s) home. Debtor(s) estimates that the value of these items to be \$500.00. The cost to replace these items would be higher. Accumul Line from Schedule A/B: 7.1 **Equipment** Tenn. Code Ann. § 26-2-103 \$150.00 \$150.00 Line from Schedule A/B: 9.1 100% of fair market value, up to any applicable statutory limit Clothing Tenn. Code Ann. § 26-2-104 \$1,000.00 \$1,000.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit **Jewelry** Tenn. Code Ann. § 26-2-103 \$500.00 \$500.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit Tenn. Code Ann. § 26-2-103 dog \$200.00 \$200.00 Line from Schedule A/B: 13.1 100% of fair market value, up to any applicable statutory limit Cash Tenn. Code Ann. § 26-2-103 \$60.00 \$60.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit **Checking: Regions** Tenn. Code Ann. § 26-2-103 \$1.00 \$1.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit 401(k): TCRS Tenn. Code Ann. § 8-36-111 \$2,500.00 \$2,500.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit Federal: 2015 Estimated Tax Refund Tenn. Code Ann. § 26-2-103 \$10,000.00 \$10,000.00 Line from Schedule A/B: 28.1

П

100% of fair market value, up to any applicable statutory limit

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Debtor 1 Debtor 2 Dallas VanBuren Kimberly VanBuren

3. Are you claiming a homestead exemption of more than \$155,675?
(Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Filed 12/29/15

Entered 12/29/15 10:36:39

Desc Main

Case 15-13030

Yes

Doc 1

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| | | | Document P | age 19 | of 57 | | |
|---------|---|---------------------|--|---------------|----------------------|-------------------------|---------------|
| Filli | in this informatio | n to identify you | r case: | | | | |
| Deh | tor 1 Da | allas VanBurer | 1 | | | | |
| DCD | | st Name | | st Name | | | |
| Deb | tor 2 K i | imberly VanBu | ren | | | | |
| (Spot | | st Name | | st Name | | - | |
| Linit | ed States Bankrup | toy Court for the | WESTERN DISTRICT OF TENNE | SSEE | | | |
| Orni | ed States Barikiup | itty Court for the. | WESTERN DISTRICT OF TERRIE | JOLL | | - | |
| Cas | e number | | | | | | |
| (if kno | own) | | | | | ☐ Check | if this is an |
| | | | | | | ameno | led filing |
| ~ · · · | | NOD | | | | | |
| Offi | icial Form 10 | <u> 16D</u> | | | | | |
| Sc | hedule D: | Creditors | Who Have Claims Se | cured | by Propert | У | 12/15 |
| | | | | | | | |
| | | | two married people are filing together, be number the entries, and attach it to this for | | | | |
| know | | | , | | . , . | | • |
| 1. Do | any creditors have | claims secured by | your property? | | | | |
| | ☐ No. Check this | box and submit th | nis form to the court with your other scl | hedules. Yo | u have nothing else | to report on this form. | |
| | Yes. Fill in all of | f the information | below. | | | | |
| | | | | | | | |
| Part | <u> </u> | ured Claims | | | Column A | Column B | Column C |
| | | | ore than one secured claim, list the creditor sarticular claim, list the other creditors in Part | | Amount of claim | Value of collateral | Unsecured |
| | | | er according to the creditor's name. | | Do not deduct the | that supports this | portion |
| | Bank of Ameri | ica | | | value of collateral. | claim | If any |
| 2.1 | Mortgage | l Ca | Describe the property that secures the c | laim: | \$107,000.00 | \$85,000.00 | \$22,000.00 |
| | Creditor's Name | - | 6439 South Bishop Chicago, IL | . | _ | | |
| | | | 60636 Cook County | | | | |
| | Attn: Bankrup | • | As of the date you file, the claim is: Checl | k all that | | | |
| | 475 Crosspoin | | apply. | k ali mat | | | |
| | Getzville, NY 1 | 4068 | ☐ Contingent | | | | |
| | Number, Street, City, S | State & Zip Code | Unliquidated | | | | |
| \A/L - | awaa tha dahta o | No. al. and | Disputed | | | | |
| _ | o owes the debt? | neck one. | Nature of lien. Check all that apply. | | | | |
| | ebtor 1 only ebtor 2 only | | | gage or secur | ea | | |
| | ebtor 2 only Debtor 1 and Debtor 2 | only | ☐ Statutory lien (such as tax lien, mechani | ic's lion) | | | |
| _ | | | ☐ Judgment lien from a lawsuit | ic s liell) | | | |
| | t least one of the deb | | ☐ Other (including a right to offset) | | | | |
| | neck if this claim re community debt | lates to a | Other (including a right to offset) | | | | |
| | • | | | | | | |
| Date | debt was incurred | | Last 4 digits of account number | | | | |
| | 1,,, | | | | | | |
| 2.2 | Weekly Pay Au | ito Sales, | Describe the property that secures the c | laim· | \$12,500.00 | \$6,550.00 | \$5,950.00 |
| | Inc. Creditor's Name | | 2004 Cadillac Escalade 164000 | | | | |
| | | | miles | | | | |
| | | | | | | | |
| | 1090 S. Highla | nd Ave. | As of the date you file, the claim is: Check apply. | k all that | | | |
| | Jackson, TN 3 | 8301 | Contingent | | | | |
| | Number, Street, City, S | State & Zip Code | Unliquidated | | | | |
| | | | ☐ Disputed | | | | |
| Who | owes the debt? | check one. | Nature of lien. Check all that apply. | | | | |
| | ebtor 1 only | | An agreement you made (such as morto | gage or secur | ed | | |
| _ | ebtor 2 only | | car loan) | | | | |
| | Debtor 1 and Debtor 2 | = | ☐ Statutory lien (such as tax lien, mechani | ic's lien) | | | |
| | t least one of the deb | | ☐ Judgment lien from a lawsuit | | | | |
| | Check if this claim re | lates to a | Other (including a right to offset) | | | | |
| (| community debt | | | | | | |

Official Form 106D

Date debt was incurred

Last 4 digits of account number

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| Debtor 1 | 1 Dallas VanBuren | | | Case number (if know) | | |
|---------------|--|---|----------------------------|---|--|--|
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | Kimberly VanBur | en | | | | |
| | First Name | Middle Name | Last Name | | | |
| | | | | | | |
| Add the | dollar value of your entr | ies in Column A on this page. | Write that number here | \$119,500.00 | | |
| | the last page of your for at number here: | m, add the dollar value totals | from all pages. | \$119,500.00 | | |
| Part 2: | List Others to Be No | tified for a Debt That You | Already Listed | | | |
| to collect fo | rom you for a debt you | owe to someone else, list the outlisted in Part 1, list the add | creditor in Part 1, and th | at you already listed in Part 1. For example, if a collection agency is trying ten list the collection agency here. Similarly, if you have more than one you do not have additional persons to be notified for any debts in Part 1, | | |
| Na | me Address | | | | | |
| -N | ONE- | | On whi | ch line in Part 1 did you enter the creditor? | | |
| | | | Last 4 | digits of account number | | |

Case 15-13030 Doc 1 Filed 12/29/15 Entered 12/29/15 10:36:39 Desc Main Page 21 of 57 Document Fill in this information to identify your case: Debtor 1 **Dallas VanBuren** Middle Name Last Name First Name Debtor 2 Kimberly VanBuren (Spouse if, filing) First Name Middle Name Last Name WESTERN DISTRICT OF TENNESSEE United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. 4.1 **Advance America** Last 4 digits of account number \$118.00 Nonpriority Creditor's Name 955 N. Parkway Ste. H When was the debt incurred? Jackson, TN 38305 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset?

■ No ☐ Yes report as priority claims

Other. Specify

☐ Debts to pension or profit-sharing plans, and other similar debts

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| | or 2 Kimberly VanBuren | Case number (if know) | |
|-----|---|---|----------|
| 4.2 | Afni | Last 4 digits of account number | \$612.00 |
| | Nonpriority Creditor's Name P.O. Box 3097 Bloomington, IL 61702 | When was the debt incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. ☐ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | Check if this claim is for a community debt | ☐ Student loans | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify US Cellular | |
| 4.3 | Cash Express | Last 4 digits of account number | \$488.00 |
| • | Nonpriority Creditor's Name 113 Whitley Ave. | When was the debt incurred? | |
| | Henderson, TN 38340 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | |
| | ☐ Debtor 1 only | ☐ Unliquidated | |
| | Debtor 2 only | ☐ Disputed | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | ☐ At least one of the debtors and another | ☐ Student loans | |
| | ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify | |
| 4.4 | Cash Express | Last 4 digits of account number | \$488.00 |
| | Nonpriority Creditor's Name 113 Whitley Ave. | When was the debt incurred? | |
| | Henderson, TN 38340 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | ☐ At least one of the debtors and another | Student loans | |
| | ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify | |
| | | • • • | |

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| | r 1 Dallas VanBuren r 2 <mark>Kimberly VanBuren</mark> | Case number (if know) | |
|-----|---|---|------------|
| 4.5 | Cash Master | Last 4 digits of account number | \$470.00 |
| | Nonpriority Creditor's Name 1335 S. Highland Jackson, TN 38301 | When was the debt incurred? | - + 110100 |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | |
| | Debtor 1 only | ☐ Unliquidated | |
| | ☐ Debtor 2 only | ☐ Disputed | |
| | ■ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | ☐ At least one of the debtors and another | ☐ Student loans | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | Other. Specify | - |
| 4.6 | CashNetUSA Nonpriority Creditor's Name | Last 4 digits of account number | \$1,085.00 |
| | 200 West Jackson Suite 2400 | When was the debt incurred? | - |
| | Chicago, IL 60606 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | |
| | ■ Debtor 1 only | ☐ Unliquidated | |
| | ☐ Debtor 2 only | □ Disputed | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | \square At least one of the debtors and another | ☐ Student loans | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | - |
| 4.7 | CMRE Financial Nonpriority Creditor's Name | Last 4 digits of account number | \$279.00 |
| | 3075 E. Imperial Hwy Ste 200 Brea, CA 92821 | When was the debt incurred? | - |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | |
| | ■ Debtor 1 only | ☐ Unliquidated | |
| | ☐ Debtor 2 only | ☐ Disputed | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | ☐ At least one of the debtors and another | Student loans | |
| | ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | Other Specify | |
| | | Other. Specify | - |

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| | r 2 Kimberly VanBuren | Case number (if know) | |
|------|---|---|-------------|
| 4.8 | Commercial Services Group, Inc | Last 4 digits of account number 2850 | \$10,586.26 |
| | Nonpriority Creditor's Name 2401 Stanley Gault Parkway Louisville, KY 40223 | When was the debt incurred? | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | ■ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: ☐ Student loans | |
| | ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | |
| 4.9 | Commonwealth Financial | Last 4 digits of account number | \$1,209.00 |
| | Nonpriority Creditor's Name 245 Main St. | When was the debt incurred? | |
| | Dickson City, PA 18519 Number Street City State Zlp Code | As of the date year file the plains in Chapter all that comb | |
| | Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | _ | Disputed | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | ☐ Student loans | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Hub City Emergency Physcians | |
| 4.10 | Conserve | Last 4 digits of account number | \$781.00 |
| | Nonpriority Creditor's Name PO Box 7 | When was the debt incurred? | |
| | Fairport, NY 14450 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | |
| | ☐ Debtor 1 only | ☐ Unliquidated | |
| | ■ Debtor 2 only | ☐ Disputed | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | ☐ At least one of the debtors and another | ☐ Student loans | |
| | Check if this claim is for a community debt | Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ■ No | | |
| | Yes | ■ Other. Specify Chicago State Univ | |

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| Debtor : | 2 Kimberly VanBuren | Case number (if know) | |
|----------|---|---|----------|
| 4.11 | Credence Resource Managment | Last 4 digits of account number 4070 | \$491.19 |
| | Nonpriority Creditor's Name 17000 Dallas Parkway Dallas, TX 75248 | When was the debt incurred? | |
| - | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | |
| | ☐ Debtor 1 only | ☐ Unliquidated | |
| | Debtor 2 only | • | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | ☐ At least one of the debtors and another | Student loans | |
| | ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify AT&T | |
| 4.12 | Credit Central | Last 4 digits of account number | \$639.00 |
| | Nonpriority Creditor's Name 700 E North St Ste 15 Greenville, SC 29601 | When was the debt incurred? | |
| - | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | Contingent | |
| | Debtor 2 only | Unliquidated | |
| | Debtor 1 and Debtor 2 only | Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | _ | ☐ Student loans | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | | _ | |
| | ☐ Yes | Other. Specify | |
| 4.13 | Emergency Med Care Facilities | Last 4 digits of account number 0601 | \$564.00 |
| | Nonpriority Creditor's Name 3075 E. Imperial Hwy. | When was the debt incurred? | |
| - | Brea, CA 92821 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ☐ Debtor 1 only | Contingent | |
| | ■ Debtor 2 only | ☐ Unliquidated | |
| | _ | ☐ Disputed | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | ☐ Student loans | |
| | Check if this claim is for a community debt | Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | |

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| | Dallas VanBuren Kimberly VanBuren | Case number (if know) | | |
|------|---|---|------------|--|
| 4.14 | Enhanced Recovery Co., LLC | Last 4 digits of account number | \$443.00 | |
| | Nonpriority Creditor's Name 8014 Bayberry Rd. Jacksonville, FL 32256 | When was the debt incurred? | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | Debtor 1 only | ☐ Unliquidated | | |
| | ☐ Debtor 2 only | Disputed | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | | |
| | ☐ At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | No | \square Debts to pension or profit-sharing plans, and other similar debts | | |
| | Yes | Other. Specify | | |
| 4.15 | Enhanced Recovery Company Nonpriority Creditor's Name | Last 4 digits of account number | \$2,360.00 | |
| | PO Box 57547 | | | |
| | acksonville, FL 32241 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | | ☐ Disputed | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | | |
| | At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | |
| | Yes | Other. Specify People Gas light and coke company | | |
| 4.16 | Equinox Financial Manage | Last 4 digits of account number | \$1,233.00 | |
| | Nonpriority Creditor's Name 2720 S River R 4 Des Plaines, IL 60018 | When was the debt incurred? | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | ☐ Debtor 1 only | ☐ Unliquidated | | |
| | ■ Debtor 2 only | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | | |
| | ☐ At least one of the debtors and another | Student loans | | |
| | ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | | |
| | Yes | Other. Specify ADT | | |
| | | • • • | | |

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| | 1 Dallas VanBuren 2 Kimberly VanBuren | Case number (if know) | | |
|------|---|---|----------|--|
| 4.17 | Family Check Advance | Last 4 digits of account number | \$450.00 | |
| | Nonpriority Creditor's Name 1345 A South Highland Jackson, TN 38301 | When was the debt incurred? | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | |
| | Who incurred the debt? Check one. ☐ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | <u> </u> | Disputed | | |
| | ■ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | | |
| | At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | No | lacksquare Debts to pension or profit-sharing plans, and other similar debts | | |
| | Yes | Other. Specify | | |
| 4.18 | First Premier Bank Nonpriority Creditor's Name | Last 4 digits of account number | \$401.00 | |
| | 601 S Minnesota Ave | When was the debt incurred? | | |
| | Sioux Falls, SD 57104 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | Debtor 1 only | ☐ Unliquidated | | |
| | Debtor 2 only | ☐ Disputed | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | | |
| | At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | | |
| | Yes | ■ Other. Specify | | |
| 4.19 | Fox Collection Center | Last 4 digits of account number | \$29.00 | |
| | Nonpriority Creditor's Name 456 Moss Trail | When was the debt incurred? | | |
| | Goodlettsville, TN 37072 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | |
| | Who incurred the debt? Check one. | | | |
| | ■ Debtor 1 only | Contingent | | |
| | □ Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | |
| | | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | |
| | | · · · · · · · · · · · · · · · · · · · | | |
| | Yes | Other. Specify | | |

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| | 1 Dallas VanBuren 2 Kimberly VanBuren | Case number (if know) | | |
|------|---|---|------------|--|
| 4.20 | Franklin Collection Service | Last 4 digits of account number | \$344.00 | |
| | Nonpriority Creditor's Name 2978 W. Jackson St. Tupelo, MS 38803 | When was the debt incurred? | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | ☐ Debtor 1 only | ☐ Unliquidated | | |
| | ☐ Debtor 2 only | ☐ Disputed | | |
| | ■ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | | |
| | ☐ At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | No | Debts to pension or profit-sharing plans, and other similar debts | | |
| | Yes | Other. Specify ATT | | |
| 4.21 | Golden Title Loans, LLC | Last 4 digits of account number | \$454.00 | |
| | Nonpriority Creditor's Name d/b/a 745 Cash | When was the debt incurred? | | |
| | 3540 Summer Ave. #210 Memphis, TN 38122 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | |
| | _ | Contingent | | |
| | Debtor 1 only | ☐ Unliquidated | | |
| | Debtor 2 only | ☐ Disputed | | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | | |
| | At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | | |
| | Yes | ■ Other. Specify 745cash | | |
| 4.22 | Green Leaf Loan Group | Last 4 digits of account number | \$1,025.00 | |
| | Nonpriority Creditor's Name c/o Atoz Financial LLC | When was the debt incurred? | | |
| | 16192 Costal Hwy Lewes, DE 19958-9776 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | |
| | Who incurred the debt? Check one. | | | |
| | ■ Debtor 1 only | Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | | |
| | ☐ At least one of the debtors and another | Student loans | | |
| | ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | |
| | ☐ Yes ☐ Other. Specify | | | |
| | | | | |

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| Kimberly VanBuren | | |
|---|---|------------|
| Hardeman County Community Health Center | Last 4 digits of account number 9382 | \$690.00 |
| Nonpriority Creditor's Name 629 Nuckolls P.O. Box 720 | When was the debt incurred? | |
| Bolivar, TN 38008 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | As of the date you me, the claim is. Oneok all that apply | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| | ☐ Disputed | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| At least one of the debtors and another | ☐ Student loans | |
| ☐ Check if this claim is for a community debt s the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify | |
| Jackson Energy Authority | Last 4 digits of account number 6380 | \$648.49 |
| Nonpriority Creditor's Name P.O. Box 2288 Jackson, TN 38302-2288 | When was the debt incurred? | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | |
| Debtor 1 only | | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| ☐ At least one of the debtors and another | Student loans | |
| ☐ Check if this claim is for a community debt | | |
| s the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify | |
| MSCB, Inc. Nonpriority Creditor's Name | Last 4 digits of account number | \$2,421.00 |
| P.O. Box 1567 1410 Industrial Park Rd. | When was the debt incurred? | |
| Paris, TN 38242 | As of the date was file the plains in Oberland what are he | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| <u> </u> | ☐ Disputed | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| At least one of the debtors and another | ☐ Student loans | |
| ☐ Check if this claim is for a community debt is the claim subject to offset? | $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | Other. Specify | |

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| Debtor 1 Dallas VanBuren Mimberly VanBuren | | Case number (if know) | | |
|---|---|---|----------|--|
| 4.26 | Phoenix Financial Services | Last 4 digits of account number | \$600.00 | |
| | Nonpriority Creditor's Name 8902 Otis Ave 103A Indianapolis, IN 46216 | When was the debt incurred? | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | Debtor 1 only | ☐ Unliquidated | | |
| | Debtor 2 only | ☐ Disputed | | |
| | ■ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | | |
| | ☐ At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | | |
| | ☐ Yes | ■ Other. Specify Hub City Emergency Physician | | |
| 4.27 | Regional Hospital | Last 4 digits of account number 2701 | \$395.94 | |
| | Nonpriority Creditor's Name 367 Hospital Blvd. Jackson. TN 38305 | When was the debt incurred? | V | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | |
| | Who incurred the debt? Check one. | C Continuest | | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | | |
| | ☐ At least one of the debtors and another | Student loans | | |
| | ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | |
| | Yes | Other. Specify | | |
| 4.28 | Rent A Center | Last 4 digits of account number | \$354.27 | |
| | Nonpriority Creditor's Name 903 Hollywood | When was the debt incurred? | | |
| - | Jackson, TN 38301 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | |
| | _ | ☐ Contingent | | |
| | Debtor 1 only | ☐ Unliquidated | | |
| | Debtor 2 only | Disputed | | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | | |
| | At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | | |
| | Yes | Other. Specify | | |

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| Debtor 1 Dallas VanBuren Kimberly VanBuren | | Case number (if know) | | |
|--|---|---|------------|--|
| 4.29 | Security Finance | Last 4 digits of account number | \$464.00 | |
| | Nonpriority Creditor's Name SFC Central Bankruptcy-Recovery P.O. Box 1893 | When was the debt incurred? | | |
| - | Spartanburg, SC 29304 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | |
| | Debtor 1 only | ☐ Contingent | | |
| | _ | ☐ Unliquidated | | |
| | Debtor 2 only | ☐ Disputed | | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | | |
| | At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | No | Debts to pension or profit-sharing plans, and other similar debts | | |
| | Yes | Other. Specify | | |
| 4.30 | Security Finance | Last 4 digits of account number | \$1,085.00 | |
| | Nonpriority Creditor's Name SFC Central Bankruptcy-Recovery P.O. Box 1893 | When was the debt incurred? | | |
| - | Spartanburg, SC 29304 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | |
| | Who incurred the debt? Check one. | As of the date you me, the claim is. Oneok an that apply | | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | _ | ☐ Disputed | | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | | |
| | At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | |
| | Yes | Other. Specify | | |
| 4.31 | Speedy Jet Loans | Last 4 digits of account number | \$1,890.00 | |
| | Nonpriority Creditor's Name PO Box 191 Potential SD 57716 | When was the debt incurred? | | |
| | Batesland, SD 57716 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | |
| | Who incurred the debt? Check one. | | | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | |
| | Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | |
| | □Yes | | | |
| | 103 | Other. Specify | | |

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| | Dallas VanBuren Kimberly VanBuren | | Case number (if know) | |
|---------------------------------|---|---|---|------------------------|
| 4.32 | In Dept of Human Services | Last 4 digits of account numb | er | \$1,088.00 |
|)) I | Nonpriority Creditor's Name c/o TN ATTY General Bankruptcy PO box 20207 | When was the debt incurred? | | Ψ1,000.00 |
| 1 | Nashville, TN 37202 Number Street City State Zlp Code | As of the date you file, the cla | m is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | Debtor 1 only | ☐ Unliquidated | | |
| | Debtor 2 only | ☐ Disputed | | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecu | red claim: | |
| | At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt s the claim subject to offset? | Obligations arising out of a s report as priority claims | eparation agreement or divorce that you did not | |
| | ■ No | ☐ Debts to pension or profit-sh | aring plans, and other similar debts | |
| | ☐ Yes | Other. Specify | | |
| | | — Other. Specify | | |
| | Village of Homewood Nonpriority Creditor's Name | Last 4 digits of account numb | er <u>6021</u> | \$770.00 |
| ı | PO Box 438495 Chicago, IL 60643 | When was the debt incurred? | | |
| Ī | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | m is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| - | Debtor 2 only | ☐ Unliquidated | | |
| | • | ☐ Disputed | | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecu | | |
| | ☐ At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt s the claim subject to offset? | Obligations arising out of a s report as priority claims | eparation agreement or divorce that you did not | |
| l | No | ☐ Debts to pension or profit-sh | aring plans, and other similar debts | |
| I | Yes | Other. Specify | | |
| Part 3: | List Others to Be Notified About a Deb | ot That You Already Listed | | |
| trying to more th any deb | o collect from you for a debt you owe to some can one creditor for any of the debts that you li ots in Parts 1 or 2, do not fill out or submit this | one else, list the original creditor in sted in Parts 1 or 2, list the additior page. | you already listed in Parts 1 or 2. For example, if Parts 1 or 2, then list the collection agency here. al creditors here. If you do not have additional pe | Similarly, if you have |
| Name and | | On which entry in Part 1 or Part 2 did <u>y</u> Line 4.16 of (<i>Check one):</i> | ou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims | , |
| | . Vaughn Way | or (oneck one). | Part 2: Creditors with Nonpriority Unsecured Cla | |
| | , CO 80014 | Last 4 digits of account number | - Fatt 2. Cleditors with Nonphority offsecured of | airiis |
| Name and | 1 Address (| On which entry in Part 1 or Part 2 did y | you list the original creditor? | |
| | | Line 4.20 of (<i>Check one</i>): | Part 1: Creditors with Priority Unsecured Claims | 3 |
| PO Box | | | ■ Part 2: Creditors with Nonpriority Unsecured Cl | aims |
| Arlingt | on, TX 76004 | Last 4 digits of account number | , , | |
| Name and | d Address (| On which entry in Part 1 or Part 2 did y | ou list the original creditor? | |
| AT&T E | Bankruptcy Dept | Line 4.11 of (<i>Check one</i>): | ☐ Part 1: Creditors with Priority Unsecured Claims | 3 |
| PO Box | | | ■ Part 2: Creditors with Nonpriority Unsecured Cla | aims |
| Ariingt | on, TX 76004 | Last 4 digits of account number | | |
| Name and | | On which entry in Part 1 or Part 2 did | ou list the original creditor? | |
| | | Line 4.10 of (<i>Check one</i>): | ☐ Part 1: Creditors with Priority Unsecured Claims | 3 |
| | King Dr o, IL 60628 | | Part 2: Creditors with Nonpriority Unsecured Cla | aims |
| Unicay | | Last 4 digits of account number | | |

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| Debtor 1 Dallas VanBuren Debtor 2 Kimberly VanBuren | | Case number (if know) | |
|--|---|---|--|
| Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? | | | |
| Hub City Emergency Physicians | Line 4.9 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | |
| P.O. Box 41999 Philadelphia, PA 19101-1999 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | |
| Filliadelphia, FA 19101-1999 | Last 4 digits of account number | | |
| Name and Address | On which entry in Part 1 or Part 2 did | d you list the original creditor? | |
| Hub City Emergency Physicians | Line 4.26 of (<i>Check one</i>): | ☐ Part 1: Creditors with Priority Unsecured Claims | |
| P.O. Box 41999 Philadelphia, PA 19101-1999 | | Part 2: Creditors with Nonpriority Unsecured Claims | |
| i iliaacipilia, i A 10101 1000 | Last 4 digits of account number | | |
| Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? | | d you list the original creditor? | |
| People Gas | Line 4.15 of (<i>Check one</i>): | ☐ Part 1: Creditors with Priority Unsecured Claims | |
| 200 E Randolph Chicago, IL 60601 | | Part 2: Creditors with Nonpriority Unsecured Claims | |
| 5/110ago, 12 00001 | Last 4 digits of account number | | |
| Name and Address | On which entry in Part 1 or Part 2 did | d you list the original creditor? | |
| Rent A Center | Line 4.28 of (<i>Check one</i>): | ☐ Part 1: Creditors with Priority Unsecured Claims | |
| 621 Old Hickory Blvd. Ste. J Jackson, TN 38301 | | Part 2: Creditors with Nonpriority Unsecured Claims | |
| Jackson, 114 30301 | Last 4 digits of account number | | |
| Name and Address | On which entry in Part 1 or Part 2 did | d you list the original creditor? | |
| US Cellular | Line 4.2 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | |
| PO Box 371345 Pittsburgh, PA 15250-7345 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | |
| i ittaburgii, FA 10230-7040 | Last 4 digits of account number | | |
| | | | |

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total claim | |
|--------------|-----|---|-----|-------------|--------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | Total Claim | |
| | 6f. | Student loans | 6f. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 34 | 956.15 |
| | 6j. | Total. Add lines 6f through 6i. | 6j. | \$34 | 956.15 |

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Document Page 34 of 57 Fill in this information to identify your case: Debtor 1 **Dallas VanBuren** Middle Name Last Name First Name Debtor 2 Kimberly VanBuren (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: WESTERN DISTRICT OF TENNESSEE Case number (if known)

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |
|--|---|
| 2.1 Miller Auto Sales 436 Airways Blvd. Jackson, TN 38301 | 2006 Chevrolet Avalanche |

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| | | Document | Page 35 of | 57 | • | |
|---------------------------|---|--|------------------------|--|---|----------------|
| Fill in this info | rmation to identify your o | case: | | | | |
| Debtor 1 | Dallas VanBuren | | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | Kimberly VanBure | | L (NI | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States B | Bankruptcy Court for the: | WESTERN DISTRICT OF TE | NNESSEE | | | |
| Case number (if known) | | | | | ☐ Check if this | s is an |
| | | | | | amended fili | ng |
| Codebtors are | | ebtors e also liable for any debts yoully responsible for supplying | | | | |
| ill it out, and n | | boxes on the left. Attach the | | | | |
| 1. Do you l | have any codebtors? (If y | ou are filing a joint case, do no | t list either spouse a | s a codebtor. | | |
| □ No | | | | | | |
| ■ Yes | | | | | | |
| | | | | | | |
| | | lived in a community proper Nevada, New Mexico, Puerto F | | | | nclude |
| ■ No. Go t | to line 3. | | | | | |
| ☐ Yes. Did | l your spouse, former spou | se, or legal equivalent live with | you at the time? | | | |
| in line 2 ag | gain as a codebtor only if 0), Schedule E/F (Official | ors. Do not include your spou that person is a guarantor o Form 106E/F), or Schedule G | r cosigner. Make sı | ure you have listed | the creditor on Schedu | ıle D (Officia |
| | mn 1: Your codebtor Number, Street, City, State and ZIP | Code | | Column 2: The c | reditor to whom you ow les that apply: | e the debt |
| 6827 Chic | ah Jackson 7 South Perry Apt E ago, IL 60621 ox husband | | | ■ Schedule D, □ Schedule E/I □ Schedule G Bank of Americ | =, line | |

Schedule H: Your Codebtors

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| Fill in this informati | ion to identify your case: | |
|---------------------------------|--|---|
| Debtor 1 | Dallas VanBuren | |
| Debtor 2 (Spouse, if filing) | Kimberly VanBuren | |
| United States Banl | kruptcy Court for the: WESTERN DISTRICT OF TENNESSEE | |
| Case number (If known) | | Check if this is: ☐ An amended filing |
| | | ☐ A supplement showing postpetition chapter 13 income as of the following date: |
| Official For | <u>rm 106l</u> | MM / DD/ YYYY |
| Schedule | I: Your Income | 12/15 |
| Be as complete an | nd accurate as possible. If two married people are filing together (De | htor 1 and Debtor 2), both are equally responsible for |

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment 1. Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. Employed Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation Include part-time, seasonal, or Employer's name **Pine Meadows Healthcare** City of Jackson self-employed work. **Employer's address** Occupation may include student P.O. Box 549 700 Nuckolls Rd. or homemaker, if it applies. Jackson, TN 38301 Bolivar, TN 38008 How long employed there? 4 years 1 week

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

- 3. Estimate and list monthly overtime pay.
- Calculate gross Income. Add line 2 + line 3.

For Debtor 1 For Debtor 2 or non-filing spouse

2. \$ 2,622.53 \$ 2,210.00

3. +\$ 0.00 +\$ 0.00

4. \$ 2,622.53 \$ 2,210.00

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| | tor 1 tor 2 | Dallas VanBuren Kimberly VanBuren | | Case | number (<i>if known</i>) | | | | |
|-----|-----------------------|--|----------------|---------|----------------------------|------|----------------|----------------|--|
| | Com | willing 4 hours | 4 | | Debtor 1 | | ebtor 2 | ouse | |
| | Cop | by line 4 here | 4. | \$_ | 2,622.53 | \$ | 2,2 | 10.00 | _ |
| 5. | List | all payroll deductions: | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 423.54 | \$ | 2 | 60.00 |) |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$ | 0.00 | \$ | | 0.00 | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 0.00 | \$ | | 0.00 | _) |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ | 0.00 | \$ | | 0.00 | <u> </u> |
| | 5e. | Insurance | 5e. | \$ | 0.00 | \$ | | 0.00 |) |
| | 5f. | Domestic support obligations | 5f. | \$ | 0.00 | \$ | | 0.00 | <u> </u> |
| | 5g. | Union dues | 5g. | \$_ | 0.00 | \$ | | 0.00 | _ |
| | 5h. | Other deductions. Specify: | _ 5h. ⊣ | - \$_ | 0.00 | - \$ | | 0.00 | <u>) </u> |
| 6. | Add | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 423.54 | \$ | 2 | 60.00 | <u>) </u> |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 2,198.99 | \$ | 1,9 | 50.00 | <u>) </u> |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ | 0.00 | \$ | | 0.00 | |
| | 8b. | Interest and dividends | 8b. | \$ - | 0.00 | \$ | | 0.00 | _ |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce | OD. | Ψ_ | 0.00 | Ψ | | 0.00 | <u>'</u> |
| | | settlement, and property settlement. | 8c. | \$ | 100.00 | \$ | 2 | 71.00 |) |
| | 8d. | Unemployment compensation | 8d. | \$ | 0.00 | \$ | | 0.00 | <u> </u> |
| | 8e. | Social Security | 8e. | \$ | 0.00 | \$ | | 0.00 | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | \$ | 0.00 | \$ | | 0.00 | - |
| | 8g. | Pension or retirement income | 8g. | \$ | 0.00 | \$ | | 0.00 | <u> </u> |
| | 8h. | Other monthly income. Specify: | _ 8h.+ | - \$ | 0.00 | \$ | | 0.00 | |
| 9. | Add | l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 100.00 | \$ | | 271.0 | 0 |
| 10. | | culate monthly income. Add line 7 + line 9. 1 the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 0. \$ | | 2,298.99 + \$_ | 2,22 | 1.00 = | = \$_ | 4,519.99 |
| 11. | Inclu othe Do i | te all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, your per friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify: | deper | | • | | chedule 11. | | 0.00 |
| 12. | | I the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certainlies | | | | | 12. | \$ | 4,519.99 |
| 13. | Do : | you expect an increase or decrease within the year after you file this form? No. | ? | | | | | Combi nonth | ned ly income |
| | _ | Yes Explain: | | | | | | | |

| Fill | in this informa | ation to identify yo | our case: | | | Ī | | | |
|------------|---|---|------------------------|--|-------------------------|-------------|-------------------|-----------------|--|
| | otor 1 | Dallas VanBı | | | | Ch | nack it | f this is: | |
| Deb | NOI I | Dallas Valibl | aren | | | | An amended filing | | |
| | bbtor 2 Kimberly VanBuren pouse, if filing) | | | | | | | | ving postpetition chapter the following date: |
| Unit | ed States Bankr | uptcy Court for the: | WESTE | ERN DISTRICT OF TEN | NESSEE | | MN | // DD / YYYY | |
| 1 | e number nown) | | | | | | | | |
| O | fficial Fo | rm 106J | | | | | | | |
| So | chedule | J: Your E | Exper | ises | | | | | 12/1 |
| Be info | as complete a | and accurate as | possible eded, atta | . If two married people ich another sheet to th | | | | | |
| Par | | ibe Your House | hold | | | | | | |
| 1. | Is this a joir | | | | | | | | |
| | □ No. Go to | o line 2. es Debtor 2 live i | | ata hayaahald2 | | | | | |
| | _ | | n a separ | ate nousenoid? | | | | | |
| | ■ N □ Y | - | t file Offic | ial Form 106J-2, <i>Expens</i> | ses for Separate Hous | sehold of D | Debtor | 2. | |
| 2. | Do you have | e dependents? | □ No | | | | | | |
| | Do not list D and Debtor 2 | | ■ Yes. | Fill out this information for each dependent | Dependent's relation | | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | | □ No |
| | dependents | | | | Son | | | 6 | ■ Yes |
| | | | | | - | | | | □ No |
| | | | | | Daughter | | | 9 | Yes |
| | | | | | Son | | | 15 | □ No ■ Yes |
| | | | | | 3011 | | | | ■ Yes □ No |
| | | | | | | | | | ☐ Yes |
| 3. | | enses include | | No | | | | | |
| | | f people other th d your depender | | Yes | | | | | |
| | | | | | | | | | |
| Est | imate your ex | | ur bankrı | uptcy filing date unless | | | | | apter 13 case to report of the form and fill in the |
| the | | h assistance and | | government assistanc cluded it on <i>Schedule</i> | | | | Your expe | enses |
| (0) | ilciai i Oilli i | ,01., | | | | | | , | |
| 4. | | or home owners! and any rent for the | | ses for your residence or lot. | . Include first mortgag | ge 4. | \$_ | | 675.00 |
| | If not include | ded in line 4: | | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. | \$ | | 0.00 |
| | • | rty, homeowner's | | | | 4b. | . – | | 0.00 |
| | | maintenance, re owner's associati | | upkeep expenses | | 4c. 4d. | | | 0.00 |
| 5. | | | | our residence, such as | home equity loans | | \$ - | | 0.00 |

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| | tor 1 | | /anBuren | _ | | |
|-----|--------|--------------|---|------------|------------|----------|
| Deb | otor 2 | Kimberi | y VanBuren C | Case num | iber (if k | (nown) |
| 6. | Utilit | ies. | | | | |
| 0. | 6a. | | , heat, natural gas | 6a. | \$ | 324.00 |
| | 6b. | • | ewer, garbage collection | 6b. | _ | 75.00 |
| | 6c. | | e, cell phone, Internet, satellite, and cable services | 6c. | | 300.00 |
| | 6d. | Other. Sp | • | 6d. | . — | 0.00 |
| 7. | | | sekeeping supplies | _ 7. | | 800.00 |
| 8. | | | children's education costs | 8. | \$ _ | 200.00 |
| 9. | | | dry, and dry cleaning | 9. | · — | 175.00 |
| | | _ | products and services | 10. | . — | 175.00 |
| | | | ental expenses | 11. | \$ _ | 350.00 |
| 12. | Trans | sportation | Include gas, maintenance, bus or train fare. | | · — | |
| | | | car payments. | 12. | \$_ | 500.00 |
| 13. | Ente | rtainment, | clubs, recreation, newspapers, magazines, and books | 13. | \$_ | 175.00 |
| 14. | Char | ritable cont | tributions and religious donations | 14. | \$ | 100.00 |
| 15. | | rance. | | | | |
| | | | nsurance deducted from your pay or included in lines 4 or 20. | 45- | • | |
| | | Life insura | | 15a. | | 0.00 |
| | | Health ins | | 15b. | | 0.00 |
| | | Vehicle in | | 15c. | . — | 177.00 |
| 40 | | | urance. Specify: | 15d. | \$_ | 0.00 |
| 16. | Spec | | nclude taxes deducted from your pay or included in lines 4 or 20. | 16. | ¢ | 0.00 |
| 17 | | | lease payments: | | Ψ _ | 0.00 |
| 17. | | | nents for Vehicle 1 | 17a. | \$ | 0.00 |
| | | | ents for Vehicle 2 | 17b. | . — | 0.00 |
| | | Other. Sp | a aife u | 17c. | . — | 0.00 |
| | | Other. Sp | | — 17d. | . — | 0.00 |
| 18. | | | s of alimony, maintenance, and support that you did not report as | — | _ | |
| | | | your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | \$ | 0.00 |
| 19. | Othe | er payment | s you make to support others who do not live with you. | | \$ | 0.00 |
| | Spec | cify: | | 19. | | |
| 20. | | | perty expenses not included in lines 4 or 5 of this form or on Scheo | | | |
| | | | s on other property | 20a. | _ | 0.00 |
| | | Real esta | | 20b. | : — | 0.00 |
| | | | homeowner's, or renter's insurance | 20c. | . — | 0.00 |
| | | | nce, repair, and upkeep expenses | 20d. | | 0.00 |
| | | | ner's association or condominium dues | 20e. | | 0.00 |
| 21. | | r: Specify: | | 21. | +\$_ | 150.00 |
| | Auto | o mainten | nance | | _+\$ | 75.00 |
| 22. | Calc | ulate vour | monthly expenses | | | |
| | | | H through 21. | | \$ | 4,251.00 |
| | | | 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ - | .,201100 |
| | | | 2a and 22b. The result is your monthly expenses. | | \$ | 4,251.00 |
| | 220. | Auu IIIIe ZZ | La and 22b. The result is your monthly expenses. | | φ - | 4,251.00 |
| 23. | Calc | ulate your | monthly net income. | | | |
| | 23a. | Copy line | 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 4,519.99 |
| | 23b. | Copy you | r monthly expenses from line 22c above. | 23b. | -\$ | 4,251.00 |
| | | | | | | |
| | 23c. | | your monthly expenses from your monthly income. | 220 | \$ | 268.99 |
| | | The result | t is your monthly net income. | 23c. | Ψ | 200.33 |
| 24. | Do 14 | nii eynert | an increase or decrease in your expenses within the year after you | ı file thi | s form | 12 |
| ∠4. | | | ou expect to finish paying for your car loan within the year or do you expect your mo | | | |
| | | | terms of your mortgage? | 5 5 1 | - | |
| | ■ N | 0. | | | | |
| | □ Ye | es | Explain here: | | | |

| Fill in this info | | | | | | |
|---------------------|---|-----------------------------|----------|---------|---|---|
| Fill in this infor | mation to identify your | case: | | | | |
| Debtor 1 | Dallas VanBuren | | | | | |
| | First Name | Middle Name | Las | t Name | | |
| Debtor 2 | Kimberly VanBur | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Las | t Name | | |
| United States Ba | ankruptcy Court for the: | WESTERN DISTRICT OF | TENNES | SSEE | | |
| Case number | | | | | | |
| (if known) | | | | | | ☐ Check if this is an |
| | | | | | | amended filing |
| You must file thi | is form whenever you f | n connection with a bankruլ | amend | ed sche | edules. Making a false sta | ntement, concealing property, or 000, or imprisonment for up to 20 |
| Sign | n Below | | | | | |
| Did you pa | ay or agree to pay some | one who is NOT an attorney | to help | you fil | l out bankruptcy forms? | |
| ■ No | | | | | | |
| ☐ Yes. I | Name of person | | | | Attach <i>Bankruptcy Pet</i> and Signature (Official F | ition Preparer's Notice, Declaration, form 119). |
| | alty of perjury, I declare e true and correct. | that I have read the summa | ry and s | schedu | es filed with this declara | tion and |
| X /s/ Dal | las VanBuren | | Х | /s/ Ki | mberly VanBuren | |
| Dallas | VanBuren | | _ | | erly VanBuren | |
| Signatu | re of Debtor 1 | | | Signat | ure of Debtor 2 | |
| Date I | December 29, 2015 | | | Date | December 29, 2015 | |

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| | First Name | Middle Name | Last Name | |
|-----------------------|--|--|--|---|
| Debtor : Spouse if | Tunnibung Tunnibun | Middle Name | Last Name | |
| United S | States Bankruptcy Court for the: V | VESTERN DISTRICT OF T | ENNESSEE | |
| Case nı | umber | | | |
| (if known) | | | | Check if this is an amended filing |
| | | | | amended ming |
| Offici | ial Form 107 | | | |
| | | airs for Individu | als Filing for Bankruptcy | 12/ |
| | | | filing together, both are equally responsi | ble for supplying correct |
| nforma | | ch a separate sheet to thi | s form. On the top of any additional page | |
| | (, , , , , , , , , , , , , , , , , , | - | | |
| Dart 1. | Give Details About Your Marital | Status and Where You I | ived Refere | |
| | | Status and Where You L | ived Before | |
| | Give Details About Your Marital nat is your current marital status? | Status and Where You L | ived Before | |
| | nat is your current marital status? Married | Status and Where You L | ived Before | |
| | nat is your current marital status? | Status and Where You L | ived Before | |
| . Wh | nat is your current marital status? Married | | | |
| . Wh | nat is your current marital status? Married Not married | | | |
| . Wh | nat is your current marital status? Married Not married ring the last 3 years, have you live | d anywhere other than wh | ere you live now? | |
| . Wh | Married Not married ring the last 3 years, have you lived | d anywhere other than wh | ere you live now? | Dates Debtor 2 lived there |
| Dee 54 | Married Not married ring the last 3 years, have you lived No Yes. List all of the places you lived ebtor 1 Prior Address: 13 E Baltimore St | in the last 3 years. Do not lived there From-To: | ere you live now? | |
| Dec 54 | Married Not married ring the last 3 years, have you lived No Yes. List all of the places you lived | d anywhere other than white in the last 3 years. Do not Dates Debtor 1 lived there | nere you live now? include where you live now. Debtor 2 Prior Address: | lived there |
| Dee 544 | Married Not married ring the last 3 years, have you lived No Yes. List all of the places you lived ebtor 1 Prior Address: 3 E Baltimore St ackson, TN 38301 | in the last 3 years. Do not lived there From-To: | include where you live now. Debtor 2 Prior Address: Same as Debtor 1 | lived there Same as Debtor 1 |
| . Wh | Married Not married ring the last 3 years, have you lived No Yes. List all of the places you lived ebtor 1 Prior Address: 13 E Baltimore St | in the last 3 years. Do not Dates Debtor 1 lived there From-To: 2/14-9/14 | include where you live now. Debtor 2 Prior Address: Same as Debtor 1 | lived there ■ Same as Debtor 1 From-To: □ Same as Debtor 1 From-To: |
| Dee 544 | Married Not married ring the last 3 years, have you lived No Yes. List all of the places you lived ebtor 1 Prior Address: 13 E Baltimore St ackson, TN 38301 | d anywhere other than white in the last 3 years. Do not Dates Debtor 1 lived there From-To: 2/14-9/14 From-To: | include where you live now. Debtor 2 Prior Address: Same as Debtor 1 | lived there ■ Same as Debtor 1 From-To: |
| Dee 544 Ja | Married Not married ring the last 3 years, have you lived No Yes. List all of the places you lived ebtor 1 Prior Address: 13 E Baltimore St ackson, TN 38301 | d anywhere other than white in the last 3 years. Do not Dates Debtor 1 lived there From-To: 2/14-9/14 From-To: | include where you live now. Debtor 2 Prior Address: Same as Debtor 1 | lived there ■ Same as Debtor 1 From-To: □ Same as Debtor 1 From-To: |

Entered 12/29/15 10:36:39 Case 15-13030 Doc 1 Filed 12/29/15 Desc Main Page 42 of 57 Document Debtor 1 **Dallas VanBuren** Debtor 2 Kimberly VanBuren Case number (if known) Part 2 **Explain the Sources of Your Income** Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Nο Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$27,841.00 \$30,959.00 Wages, commissions, Wages, commissions. (January 1 to December 31, 2014) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. П Nο Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below.. (before deductions and Describe below. (before deductions and exclusions) exclusions) From January 1 of current year until Child Support \$1,200.00 **Child Support** \$3,252.00 the date you filed for bankruptcy: \$0.00 **Foods Stamps** \$1.088.00 Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to

Creditor's Name and Address

Dates of payment

an attorney for this bankruptcy case.

Total amount paid

Amount you still owe

Was this payment for ...

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| De | DIOI 2 Kimberly vanburen | | Cas | e number (# known) | | |
|-----|---|--|--|---|------------------------------------|-----------------------------------|
| | | | | | | |
| 7. | Within 1 year before you filed for bankrupto Insiders include your relatives; any general par corporations of which you are an officer, direct including one for a business you operate as a support and alimony. | rtners; relatives of any gen or, person in control, or ow | eral partners; partnerner of 20% or more | erships of which ye of their voting se | ou are a gener curities; and ar | al partner; ny managing agent, |
| | ■ No | | | | | |
| | ☐ Yes. List all payments to an insider | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment |
| 8. | Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cost | <i>.</i> , , , , , , , , , , , , , , , , , , , | ments or transfer a | any property on a | eccount of a d | ebt that benefited an |
| | No | | | | | |
| | ☐ Yes. List all payments to an insider | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for Include cred | this payment itor's name |
| Pa | rt 4: Identify Legal Actions, Repossession | s, and Foreclosures | | | | |
| 9. | Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title | | | | | rt or custody |
| | Case number | | | | | |
| | Rent A Center vs Dallas VanBuren 14-cv-3213 | Garnishment | Madison Count Sessions 515 S Liberty S Jackson, TN 38 | it | ☐ Pending ☐ On appe ☐ Conclud | al |
| 10. | Within 1 year before you filed for bankrupto Check all that apply and fill in the details below ■ No ■ Yes. Fill in the information below. | v. | rty repossessed, f | oreclosed, garni | shed, attached | |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the property |
| | David A Carrian | Explain what happened | | 40/4 | 4 40/45 | * 00.04 |
| | Rent A Center 903 Hollywood Jackson, TN 38301 | ☐ Property was reposse☐ Property was foreclos | ssed. | 12/1 | 4-12/15 | \$92.64 |
| | | ■ Property was garnishe | | | | |
| | | ☐ Property was attached | | | | |
| | | Property was attached | ı, seizea or ieviea. | | | |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment becan No Yes. Fill in the details. | | uding a bank or fi | nancial institutio | n, set off any | amounts from your |
| | Creditor Name and Address | Describe the action the | creditor took | | action was | Amount |
| | | | | taker | 1 | |

Debtor 1

Dallas VanBuren

Case 15-13030 Doc 1 Filed 12/29/15 Entered 12/29/15 10:36:39 Desc Main Document Page 44 of 57 Debtor 1 **Dallas VanBuren** Debtor 2 Kimberly VanBuren Case number (if known) 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο п Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Nο П Yes. Fill in the details. Person Who Was Paid Description and value of any property **Date payment** Amount of payment **Address** transferred or transfer was **Email or website address** made Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Amount of Date payment payment Address transferred or transfer was

made

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Dallas VanBuren Kimberly VanBuren Debtor 2

Case number (if known)

| Person Who Received Transfer Address Person's relationship to you Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Pos. Fill in the details. Name of trust Description and value of the property transferred Date Transfer was made Description and value of the property transferred Date Transfer was made Description and value of the property transferred Date Transfer was made Description and value of the property transferred Date Transfer was made Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts or instruments held in your name, or for your benefit, closed, sold, and the financial institutions. No You Fill in the details. Name of Financial Institution and Address (Number, Sevec, City, State and ZIP Code) Pass and ZIP Code) Pass Fill in the details. Name of Storage Facility Address (Number, Sevec, City, State and ZIP Code) Who else has or had access to It? Address (Number, Sevec, City, State and ZIP Code) Address (Number, Sevec, City, State and ZIP Code) Pass and ZIP Code) Describe the contents Do you still have It? Address (Number, Sevec, City, State and ZIP Code) Who else has or had access to It? Address (Number, Sevec, City, State an | 18. | Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your businclude both outright transfers and transfers made include gifts and transfers that you have already line. No Yes, Fill in the details. | iness or financial affa e as security (such as t | irs? he granting of a | | | | |
|--|-----|--|---|--------------------------|------------|-----------------------------|---|--|
| Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No | | | | | payme | ents received or debts | | |
| beneficiary? (These are often called asset-protection devices.) Name of trust Description and value of the property transferred made Date Transfer was made Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No No No Describe the contents Do you still have it? Address (Number, Street, City, State and ZIP Code) No No No State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) No No State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Code) Where is the property? (Number, Street, City, State and ZIP Code) Code) George Code Value Address (Number, Street, City, State and ZIP Code) Owner's Name Address (Number, Street, City, State and ZIP Code) Owner's Name Address (Number, Street, City, State and ZIP Code) Owner's N | | Person's relationship to you | | | - | - | | |
| Mikhin 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? | 19. | beneficiary? (These are often called asset-protection devices.) No | | | | | | |
| Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes, Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) No Yes, Fill in the details. No No State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) No Yes, Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) No Yes, Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes, Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes, Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes, Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes, Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes, Fill in the details. | | Name of trust | Description and va | alue of the prop | erty trans | sferred | Date Transfer was | |
| Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes, Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) No Yes, Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) No Yes, Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) No Yes, Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes, Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes, Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes, Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes, Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes, Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) No Yes, Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) No Yes, Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) No Yes, Fill in the details. | | | · | | • | | made | |
| sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes, Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. No | Par | t 8: List of Certain Financial Accounts, Instru | uments, Safe Deposit | Boxes, and Sto | rage Unit | ts | | |
| houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Do you still have it? Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Where is the property? (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information | 20. | sold, moved, or transferred? | • | | | | , , | |
| Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Last 4 digits of account number Instrument Last 4 digits of account or instrument Last 4 digits of account number Instrument Last 4 digits of account number Last balance Last | | houses, pension funds, cooperatives, associa | | | | it; snares in banks, credit | unions, prokerage | |
| Address (Number, Street, City, State and ZIP 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No | | _ ''' | | | | | | |
| No | | Address (Number, Street, City, State and ZIP | • | • • | nt or | closed, sold, moved, or | Last balance before closing or transfer | |
| Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) No No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Describe the contents Do you still have it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Code) Part 10: Give Details About Environmental Information | 21. | cash, or other valuables? No | ar before you filed for | bankruptcy, an | y safe dep | oosit box or other deposi | tory for securities, | |
| Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information | | | William I and a second | 1- '10 | D | thtt- | D | |
| No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information | | | Address (Number, Str | | Describe | tne contents | | |
| □ Yes. Fill in the details. Name of Storage Facility Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Describe the contents Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. ■ No □ Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information | 22. | Have you stored property in a storage unit or p | place other than your | home within 1 y | year befoi | re you filed for bankruptc | у | |
| Address (Number, Street, City, State and ZIP Code) to it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information | | _ | | | | | | |
| 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Value Part 10: Give Details About Environmental Information | | | to it? Address (Number, Str | | Describe 1 | the contents | | |
| 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Value Part 10: Give Details About Environmental Information | Par | t 9: Identify Property You Hold or Control for | r Someone Fise | | | | | |
| No Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Value Part 10: Give Details About Environmental Information | | Do you hold or control any property that some | | ide any property | y you bori | rowed from, are storing fo | or, or hold in trust | |
| ☐ Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Code) Part 10: Give Details About Environmental Information | | _ | | | | | | |
| Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information | | | | | | | | |
| Part 10: Give Details About Environmental Information | | Owner's Name | (Number, Street, City, St | | Describe | the property | Value | |
| | Dan | + 10: Give Details About Environmental Inform | , | | | | | |
| · · · · · · · · · · · · · · · · · · · | | | | | | | | |
| Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or | | Environmental law means any federal state o | r local statute or requ | lation concerni | na nolluti | ion contamination releas | ses of hazardous or | |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

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toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Dallas VanBuren Debtor 1 Debtor 2 Kimberly VanBuren

Case number (if known)

| | regi | ulations controlling the cleanup of thes | se substances, wastes, or material. | | | |
|-----|----------|--|---|-------|-----------------------------------|-------------------------|
| | | means any location, facility, or proper wn, operate, or utilize it, including disp | • | law, | , whether you now own, operate | , or utilize it or used |
| | | <i>ardous material</i> means anything an env ardous material, pollutant, contaminan | | s wa | ste, hazardous substance, toxic | substance, |
| Rep | ort a | II notices, releases, and proceedings th | hat you know about, regardless of whe | n the | ey occurred. | |
| 24. | Has | any governmental unit notified you that | at you may be liable or potentially liable | e un | der or in violation of an environ | mental law? |
| | | No | | | | |
| | | Yes. Fill in the details. | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | ıd | Environmental law, if you know it | Date of notice |
| 25. | Hav | e you notified any governmental unit o | • | | | |
| | | No | | | | |
| | | Yes. Fill in the details. | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | nd | Environmental law, if you know it | Date of notice |
| 26. | Hav | e you been a party in any judicial or ad | Iministrative proceeding under any env | /iron | mental law? Include settlements | and orders. |
| | _ | | | | | |
| | _ | No Yes. Fill in the details. | | | | |
| | Ca | se Title | Court or agency | Na | ture of the case | Status of the |
| | | se Number | Name Address (Number, Street, City, State and ZIP Code) | ING | ture of the case | case |
| Pa | t 11: | Give Details About Your Business or | r Connections to Any Business | | | |
| 27. | Witl | hin 4 years before you filed for bankrup | otcv. did vou own a business or have a | nv of | f the following connections to a | nv business? |
| | | | in a trade, profession, or other activity | - | _ | • |
| | | _ | pany (LLC) or limited liability partners | | - | |
| | | ☐ A partner in a partnership | | | • | |
| | | ☐ An officer, director, or managing ex | xecutive of a corporation | | | |
| | | _ | ng or equity securities of a corporation | 1 | | |
| | | No. None of the above applies. Go to | | - | | |
| | _ | •• | | _ | | |
| | Bu | res. Check all that apply above and fill siness Name | Il in the details below for each busines Describe the nature of the business | is. | Employer Identification numb | or |
| | Ad | dress | | | Do not include Social Security | |
| | (Nul | mber, Street, City, State and ZIP Code) | Name of accountant or bookkeeper | | Dates business existed | |
| 28. | | hin 2 years before you filed for bankrup itutions, creditors, or other parties. | otcy, did you give a financial statement | to a | nyone about your business? Inc | lude all financial |
| | | No Yes. Fill in the details below. | | | | |
| | Na Ad | me dress | Date Issued | | | |

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy

(Number, Street, City, State and ZIP Code)

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| Debtor Debtor | | Document | 3 | ber (if known) |
|------------------|--|--------------------------|------------------------------------|--|
| with a | e and correct. I understand that maki bankruptcy case can result in fines u C. §§ 152, 1341, 1519, and 3571. | • | . | g money or property by fraud in connection both. |
| /s/ Da | Ilas VanBuren | /s/ Kimb | erly VanBuren | |
| Dallas | s VanBuren | Kimberl | y VanBuren | |
| Signat | ture of Debtor 1 | Signatur | e of Debtor 2 | |
| Date | December 29, 2015 | Date | December 29, 2015 | |
| Did you | attach additional pages to Your Sta | tement of Financial Aft | airs for Individuals Filing for B | ankruptcy (Official Form 107)? |
| ■ No | | | | |
| ☐ Yes | | | | |
| Did you | ı pay or agree to pay someone who i | s not an attorney to hel | p you fill out bankruptcy forms | 9? |
| ■ No | | | | |
| ☐ Yes. | Name of Person Attach the B | ankruptcy Petition Prepa | rer's Notice, Declaration, and Sig | nature (Official Form 119). |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 15-13030 Doc 1 Filed 12/29/15 Entered 12/29/15 10:36:39 Desc Main Document Page 52 of 57

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of Tennessee

| In | re | Dallas VanBure Kimberly VanBu | = = | | Case No. | | | | |
|---------------------------------------|--|---|--------------------|--|----------------------|--------------------------|-----------|--|--|
| | | Milliborry variation | il e il | Debtor(s) | Chapter | 13 | | | |
| | | DISC | LOSURE OF COMPE | ENSATION OF ATTOR | RNEY FOR DE | EBTOR(S) | | | |
| 1. | cor | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: | | | | | | | |
| | For legal services, I have agreed to accept | | | | \$ | 3,000.00 | | | |
| | | | | 1 | | 0.00 | | | |
| | | Balance Due | | | \$ | 3,000.00 | | | |
| 2. | Th | The source of the compensation paid to me was: | | | | | | | |
| | | Debtor | ☐ Other (specify): | | | | | | |
| 3. | The source of compensation to be paid to me is: | | | | | | | | |
| | | Debtor | ☐ Other (specify): | | | | | | |
| 4. | ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. | | | | | | | | |
| | ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. | | | | | | | | |
| 5. | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: | | | | | | | | |
| | a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; e. [Other provisions as needed] | | | | | | | | |
| 6. | . By agreement with the debtor(s), the above-disclosed fee does not include the following service: | | | | | | | | |
| | | | | CERTIFICATION | | | | | |
| this | | ertify that the forego kruptcy proceeding. | | ny agreement or arrangement for | payment to me for re | epresentation of the deb | tor(s) in | | |
| December 29, 2015 /s/ Alissa York Gay | | | | | | | | | |
| Date | | | | Alissa York Gay | | | | | |
| | | | | Signature of Attorne Teel & Maroney, I | | | | | |
| | | | | 425 East Baltimo | | | | | |
| | | | | Jackson, TN 3830 | | | | | |
| | | | | (731)424-3315 Fa | ax: (731)424-3501 | | _ | | |
| 1 | | | | ıvarne ој taw ji rm | | | | | |

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United States Bankruptcy Court Western District of Tennessee

| In re | Dallas VanBuren Kimberly VanBuren | | Case No. | | | | | | | |
|--|--------------------------------------|-----------------------|----------|----|--|--|--|--|--|--|
| | | Debtor(s) | Chapter | 13 | | | | | | |
| VERIFICATION OF CREDITOR MATRIX The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge. | | | | | | | | | | |
| Date: | December 29, 2015 | /s/ Dallas VanBuren | | _ | | | | | | |
| | | Signature of Debtor | | | | | | | | |
| Date: | December 29, 2015 | /s/ Kimberly VanBuren | | | | | | | | |
| | | Kimberly VanBuren | | | | | | | | |

Signature of Debtor

ADT Secuirty Services 3190 S. Vaughn Way Aurora, CO 80014

Advance America 955 N. Parkway Ste. H Jackson, TN 38305

Afni P.O. Box 3097 Bloomington, IL 61702

AT&T Bankruptcy Dept PO Box 769 Arlington, TX 76004

AT&T Bankruptcy Dept PO Box 769 Arlington, TX 76004

Bank of America Mortgage Attn: Bankruptcy Dept. 475 Crosspoint Parkway Getzville, NY 14068

Cash Express 113 Whitley Ave. Henderson, TN 38340

Cash Express 113 Whitley Ave. Henderson, TN 38340

Cash Master 1335 S. Highland Jackson, TN 38301

CashNetUSA 200 West Jackson Suite 2400 Chicago, IL 60606

Chicago State University 9501 S King Dr Chicago, IL 60628

CMRE FInancial 3075 E. Imperial Hwy Ste 200 Brea, CA 92821

Commercial Services Group, Inc 2401 Stanley Gault Parkway Louisville, KY 40223 Commonwealth Financial 245 Main St. Dickson City, PA 18519

Conserve PO Box 7 Fairport, NY 14450

Credence Resource Managment 17000 Dallas Parkway Dallas, TX 75248

Credit Central 700 E North St Ste 15 Greenville, SC 29601

Emergency Med Care Facilities 3075 E. Imperial Hwy. Brea, CA 92821

Enhanced Recovery Co., LLC 8014 Bayberry Rd. Jacksonville, FL 32256

Enhanced Recovery Company PO Box 57547 Jacksonville, FL 32241

Equinox Financial Manage 2720 S River R 4 Des Plaines, IL 60018

Family Check Advance 1345 A South Highland Jackson, TN 38301

First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104

Fox Collection Center 456 Moss Trail Goodlettsville, TN 37072

Franklin Collection Service 2978 W. Jackson St. Tupelo, MS 38803

Golden Title Loans, LLC d/b/a 745 Cash 3540 Summer Ave. #210 Memphis, TN 38122

Green Leaf Loan Group c/o Atoz Financial LLC 16192 Costal Hwy Lewes, DE 19958-9776

Hardeman County Community Health Center 629 Nuckolls P.O. Box 720 Bolivar, TN 38008

Hub City Emergency Physicians P.O. Box 41999 Philadelphia, PA 19101-1999

Hub City Emergency Physicians P.O. Box 41999 Philadelphia, PA 19101-1999

Jackson Energy Authority P.O. Box 2288 Jackson, TN 38302-2288

Miller Auto Sales 436 Airways Blvd. Jackson, TN 38301

MSCB, Inc. P.O. Box 1567 1410 Industrial Park Rd. Paris, TN 38242

People Gas 200 E Randolph Chicago, IL 60601

Phoenix Financial Services 8902 Otis Ave 103A Indianapolis, IN 46216

Regional Hospital 367 Hospital Blvd. Jackson, TN 38305

Rent A Center 903 Hollywood Jackson, TN 38301

Rent A Center 621 Old Hickory Blvd. Ste. J Jackson, TN 38301

Security Finance SFC Central Bankruptcy-Recovery P.O. Box 1893 Spartanburg, SC 29304 Security Finance SFC Central Bankruptcy-Recovery P.O. Box 1893 Spartanburg, SC 29304

Speedy Jet Loans PO Box 191 Batesland, SD 57716

Tn Dept of Human Services c/o TN ATTY General Bankruptcy PO box 20207 Nashville, TN 37202

US Cellular PO Box 371345 Pittsburgh, PA 15250-7345

Village of Homewood PO Box 438495 Chicago, IL 60643

Weekly Pay Auto Sales, Inc. 1090 S. Highland Ave. Jackson, TN 38301